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## FACSIMILE COVER SHEET

NOV 19 2007

Deliver to: Commissioner for Patents, USPTOArt Group: 1762Facsimile No.: (571) 273-8300Date: November 19, 2007From: Justin K. Brask, Reg. No. 61,080Our Docket No.: 008209USA/FEF/GCM/PJSNumber of pages 2 including this sheet.Application No.: 10/772,893Filing Date: 2/4/2004Docket Due Date(s):   

Enclosed are the following documents:

<input type="checkbox"/> Amendment: _____ ( ____ pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief ( ____ pgs)	<input type="checkbox"/> Notice of Appeal (in duplicate)
<input type="checkbox"/> Application: _____ ( ____ pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet ( ____ pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Facsimile	<input type="checkbox"/> Reply Brief ( ____ pgs)
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<input type="checkbox"/> Drawings: ____ sheets, ____ figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
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<input type="checkbox"/> IDS & PTO/SB/08 ( ____ pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input checked="" type="checkbox"/> Other: <u>Change of Correspondence Address to associate application with Customer Number 45401.</u>	<input type="checkbox"/> Transmittal Letter

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**Application**

 Address to:  
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 P.O. Box 1450  
 Alexandria, VA 22313-1450

Application No.	10/772,893
Filing Date	February 4, 2004
First Named Inventor	Pravin K. Narwankar
Group Art Unit	1762
Examiner Name	Kelly M. Stouffer
Attorney Docket Number	008209 USA/FEP/GCM/PJS

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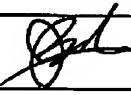
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I am the:

- Applicant/Inventor.
- Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- Attorney or Agent of record. Registration Number 61,080.

 Typed or Printed Name Justin K. Brask, Reg. No. 61,080
Signature Date November 19, 2007

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of \_\_\_\_\_ forms are submitted.

 Based on PTO/SB/122 (04-05) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 11/30/2005.  
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